

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL090036	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 12/11/2014
NAME OF PROVIDER OR SUPPLIER LIBERTY FAMILY CARE		STREET ADDRESS, CITY, STATE, ZIP CODE 9937 WAXHAW HWY WAXHAW, NC 28173		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
C 000	Initial Comments Report by Suzanna Fay DHSR Construction Section conducted a Biennial Survey on December 11, 2014 at the above referenced facility. DHSR records indicate the home was first licensed on June 16, 2012 as a Family Care Home for up to three non-ambulatory Residents (unable to evacuate and respond without any physical or verbal assistance during a fire or other emergency). Based on this information we are requiring the home to maintain compliance with the following: the 2005 Rules 10A NCAC 13G for Family Care Homes and the 2009 North Carolina State Building Code - Residential (One & Two Family Dwelling) - Section R101.2. At the time of our visit, we cited deficiencies that require an acceptable plan of correction. They are as follows:	C 000		
C 108	Existing Home Remodeling-Submit Plans SECTION .0300 - THE BUILDING 10A NCAC 13G .0302 DESIGN AND CONSTRUCTION (e) Any existing licensed home that plans to have new construction, remodeling or physical changes done to the facility shall have drawings submitted by the owner or his appointed representative to the Division of Health Service Regulation for review and approval prior to commencement of the work. This Rule is not met as evidenced by: 1. The Provider stated that they intended to construct a six bed facility onto the home. Submit	C 108		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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C 108	Continued From page 1 all plans for approval to DHSR/Construction. Note: unless the addition is a separate structure, the existing facility would have to meet the current requirements of the NCSBC and the licensing rules.	C 108		
C 109	Construction-Two Stories SECTION .0300 - THE BUILDING 10A NCAC 13G .0302 DESIGN AND CONSTRUCTION (f) If the building is two stories in height, it shall meet the following requirements: (1) Each floor shall be less than 2500 square feet in area if existing construction or, if new construction, shall not exceed the allowable area for R-4 occupancy in the North Carolina State Building Code; (2) Aged or disabled persons are not to be housed on any floor above or below grade level; (3) Required resident facilities are not to be located on any floor above or below grade level; and (4) A complete fire alarm system with pull stations on each floor and sounding devices which are audible throughout the building shall be provided. The fire alarm system shall be able to transmit an automatic signal to the local emergency fire department dispatch center, either directly or through a central station monitoring company connection. This Rule is not met as evidenced by: 1. The fire alarm system is a monitored system. During the survey, the system was placed in test mode. All of the smoke detectors were sprayed with smoke check. Only a few of the heads activated the central alarm system. The Provider	C 109		

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C 109	Continued From page 2 stated that it was only because the heads were set off too quickly between alarms and normally, they all set off the central alarm. Verify that the system is working properly. 2. The home has an approved keypad system instead of pull stations on each floor. This was accepted with the requirement that a sign be posted at each keypad in 1" tall red letters stating, "In case of fire, press * (or the symbol on the keypad.) Verify that these signs are posted or have them posted. Provide verification of the deficiency.	C 109		
C 117	Have Current San. And Fire Safety Approvals SECTION .0300 - THE BUILDING 10A NCAC 13G .0302 DESIGN AND CONSTRUCTION (n) The home shall have current sanitation and fire and building safety inspection reports which shall be maintained in the home and available for review. This Rule is not met as evidenced by: 1. The Provider could not locate the current Fire Inspection Report. Provide a copy of the most recent fire inspection to DHSR/Construction Section with the signed Plan of Corrections.	C 117		
C 146	Outside Entrances/Exits-Ramp(s) SECTION .0300 - THE BUILDING 10A NCAC 13G .0312 OUTSIDE ENTRANCE AND EXITS (c) At least one principal outside entrance/exit for the residents' use shall be at grade level or accessible by ramp with a one inch rise for each 12 inches of length of the ramp. For the	C 146		

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C 146	Continued From page 3 purposes of this Rule, a principal outside entrance/exit is one that is most often used by residents for vehicular access. If the home has any resident that must have physical assistance with evacuation, the home shall have two outside entrances/exits at grade level or accessible by a ramp. This Rule is not met as evidenced by: 1. The facility currently has one non-ambulatory Resident. Only one of the exits is accessible. Provide a second exit that is at grade or accessible by a handicap ramp. Pull all necessary permits to construct the ramp. Provide documentation of the work.	C 146		
C 153	Houskeeping And Furnishings-Clean, Repaired SECTION .0300 - THE BUILDING 10A NCAC 13G .0315 HOUSEKEEPING AND FURNISHINGS (a) Each family care home shall: (1) have walls, ceilings, and floors or floor coverings kept clean and in good repair; (2) have no chronic unpleasant odors; (3) have furniture clean and in good repair; (e) This Rule shall apply to new and existing homes. This Rule is not met as evidenced by: 1. The Resident bathroom had a strong urine odor. Clean the bathroom to eliminate the odor and take any precautions to prevent this from becoming a chronic problem.	C 153		
C 169	Fire Safety-Smoke Detectors SECTION .0300 - THE BUILDING 10A NCAC 13G .0316 FIRE SAFETY AND	C 169		

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C 169	<p>Continued From page 4</p> <p>DISASTER PLAN</p> <p>(b) The building shall be provided with smoke detectors as required by the North Carolina State Building Code and U.L. listed heat detectors connected to a dedicated sounding device located in the attic and basement. These detectors shall be interconnected and be provided with battery backup.</p> <p>Note: Smoke detectors are required to be interconnected by this Rule. The application of the Rule permits the heat detectors to be interconnected with smoke detectors, but does not require it.</p> <p>This Rule is not met as evidenced by:</p> <ol style="list-style-type: none"> 1. The 2009 NCSRBC, which was the code under which the facility was licensed, requires smoke detectors in each sleeping room and immediately outside the sleeping room. The smoke detectors should be wired to the house current, be interconnected and have battery back-up. The upstairs bedrooms where the family resides do not have smoke detectors in the rooms. There are smoke detectors in the hallway outside the bedrooms. When the smoke detectors in the facility were tested, they each sounded at the head and did not appear to be interconnected. Contract a licensed electrician to install smoke detectors in each of the bedrooms and make sure all of the smoke detectors are interconnected per the building code in effect at the time. 2. The smoke detector in Bedroom 2 was sounding at a very low decibel when it was tested. Contract a licensed electrician to repair or replace the detector. 	C 169		

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C 174	Continued From page 5	C 174		
C 174	<p>Building Equipment Maintained Safe, Operating</p> <p>SECTION .0300 - THE BUILDING 10A NCAC 13G .0317 BUILDING SERVICE EQUIPMENT</p> <p>(a) The building and all fire safety, electrical, mechanical, and plumbing equipment in a family care home shall be maintained in a safe and operating condition.</p> <p>(j) This Rule shall apply to new and existing family care homes.</p> <p>This Rule is not met as evidenced by:</p> <p>1. The overhead light fixture in the shower of the Residents' bathroom was not secure to the ceiling. Secure the fixture.</p> <p>2. Some of the trim around the door of the stair at the kitchen had fallen off. Contract a qualified vendor to install the missing trim.</p> <p>3. The laundry room was relocated and the exterior opening at the old location was open. Contract a qualified vendor to seal or patch the opening. Provide verification of the repairs.</p> <p>4. There is some damaged siding along the back of the facility over the sunroom and along the bottom edge to the right of the sunroom. Contract a qualified vendor to replace the damaged siding. Provide documentation of the repairs.</p> <p>5. The electric panel in the basement was not labeled. Contract a licensed electrician to properly label the panel.</p>	C 174		